Simon Peter Edwards

2002-018

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DECLARATION FOR UTILITY OR

DESIGN PATENT APPLICATION Attorney Docket Number

First Named Inventor

PATENT APPLICATION (37 CFR 1.63)		COMPLETE IF KNOWN								
		Application Number								
Declaration Declaration		Filing Date		09/13/2002						
Submitted OR with Initial	Submitted after initial Filing (surcharge	Art Unit								
Filing	(37 ČFR 1.16 (e)) required)	Examiner Name								
As the below named inventor, I hereby declare that:										
My residence, mailing address, and citizenship are as stated below next to my name.										
I believe I am the original and first in	ventor of the subject matter w	hich is claimed and for whi	ch a patent is sou	ght on the invention entitled:						
Apparatus and Method	for Asentic Serial E	illing of Contains								
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the seculiarities of which	(Title of the In	vention)								
the specification of which										
ls attached hereto										
OR was filed on (MM/00/000) 09/13/2002										
was filed on (MM/DD/YYYY) 09/13/2002 as United States Application Number or PCT International										
Application Number PCT/US02/29203 and was amended on (MM/DD/YYYY) (If applicable).										
I hereby state that I have reviewed an any amendment specifically referred to	d understand the contents of	the show identified								
I acknowledge the duty to disclose info applications, material information which international filling date of the continue	omation which is material to the became available between	patentability as defined in a the filing date of the prior	37 CFR 1.58, Inclusive and the	uding for continuation-in-part						
applications, material information which became available between the filling date of the prior application and the national or PCT international filling date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant States of America, listed below and have also identified below, by checking the box, any foreign application country other than the United										
States of America, listed below and in breeder's rights certificate(s), or any claimed.	lave also identified below, by PCT international application	application which designate checking the box, any for a harden of the box.	ed at least one creign application i	ountry other than the United for patent. Inventor's or plant						
Prior Foreign Application	Т триовио			plication on which priority is						
Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO						
PCT/US02/29203										
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Additional foreign application nur	mbers are listed on a supplen	nental priority data sheet P	TO/SB/02B bit-ch							
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:										

PTC/SB/01 (10-01)
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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number or Bar Code Labe	1 :	`		OR	V	Correspondence address below		
Law Office of Terry L. Miller								
Name								
24832 Via San Fernando								
Mission Viejo City	:	Calif	ornia	I		92692 zip		
US	949-95 ephone					949-951-8456 Fax		
I hereby declare that all statements made herein of my o	I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the							
NAME OF SOLE OR FIRST INVENTOR:	A petition h	as bee	n filec	l for ti	his un	nsigned inventor		
Given Name Simon Peter (first and middle [if any])		Family or Sun	/ Name	Edv	wards) 		
Inventor's Signature						Date 19 FEB 03		
Irvine	California		US		-	British		
Residence: City 45 Palatine, Apt 406	State		Coun	шу		Citizenship		
45 Palatine, Apt 406	•							
Mailing Address			· · · ·					
Irvine	California	. 1		926	612	us		
City	State		ZIP			Country		
NAME OF SECOND INVENTOR:	A petition ha	s been	filed	for thi	is uns	signed inventor		
Given Name Douglas Kent (first and middle [if any])		Family or Sun	/ Name name	Stri	icklin			
Inventor's Signature						Date 19 FEBU3		
Brea	California	_ _	us			US		
Residence: City	State	<u>:</u>	Coun	•		Citizenship		
304 Copa De Oro	.:							
Mailing Address								
Brea city	California State		ZIP	928	323	US Country		
Additional inventors are being named on thes	upplemental Addit	ional Inve	entor(s)) sheet	(s) PT(O/SB/02A attached hereto.		

PTO/SB/02A (10-00)

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 3 of 3

Name of Additional Joint Inventor, if an	y:	A petition has	been filed for t	his unsigned inventor				
Chester Given Name	Savage Family Name or Surname							
Inventor's Signature	mage		·	Date 3/26/03				
irvine Residence: City	California state	US Country	t	US Citizenship				
6 Harvest Mailing Address				•				
Mailing Address								
city Irvine	California State	92714 ZIP	Count	US ry				
Name of Additional Joint Inventor, if any:								
Donald E. Given Ripley Family Name or Surname								
Inventor's Signature Mondel & Riplica Date 2/19/03								
Oceanside Residence: City	Californía state	Country		US Citizenship				
5010 Caspian Drive								
Mailing Address								
Oceanside City	California State	92057 ZIP	Count	US				
Name of Additional Joint Inventor, if ar	ıy:	☐ A petition has b		s unsigned inventor				
Given Name		Family Name or Surname						
Inventor's Signature				Date				
Residence: City State		Country		Citizenship				
Mailing Address								
Mailing Address								
City	State	ZIP	c	ountry				

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PTO/SB/81 (09-03)

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	POWER OF ATTORNEY		Filing Date				
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CORRESPONDE	NCE ADDRESS	Title Art Unit			Aseptic Serial Filling of Containe		
	ION FORM						
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		Attorn	ey Docket Nur	mber	2002-	-016	
hereby appoint:					` -		
Practitioners associated	with the Customer Number:		•		:-:		
OR							
Practitioner(s) named be	low:						
·	Name			Re	istration I	Number	
Terry L. Miller			29,568				
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The address associated	ed with Customer Number:			-		·	
OR				-			
Firm or Individual Name	Law Office of Terry L	. Miller					
Address	24832 Via San Ferna	ndo					
Address							
City	Mission Viejo		State	Califo	rnia	Zip O2602	
Country	US			canto	IIIa	^{24p} 92692	
Telephone	949-951-8456		Fax	040.0	E1 04F	<u> </u>	
am the:				1 747-5	51-845		
Applicant/Inventor.							
Assignee of record of Statement under 37 C	the entire interest. See 37 CF FR 3.73(b) is enclosed. (Form	R 3.71.	16)				
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Total of 4	forms are submitted.		••				

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number Application Number Filing Date **POWER OF ATTORNEY First Named Inventor** and Simon Edwards **CORRESPONDENCE ADDRESS** Aseptic Serial Filling of Containers **Art Unit INDICATION FORM Examiner Name Attorney Docket Number** 2002-016 I hereby appoint Practitioners associated with the Customer Number: Practitioner(s) named below: Name Registration Number Terry L. Miller 29,568 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The address associated with the above-mentioned Customer Number: OR The address associated with Customer Number: Firm or Law Office of Terry L. Miller Individual Name Address 24832 Via San Fernando Address City Mission Viejo State California Zip 92692 Country US Telephone 949-951-8456 Fax 949-951-8456 am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Name Douglas Kent Stricklin Telephone 444-223

This collection of Information is required by 37 CFR 1.31 and 1.33. The information is required by 37 CFR 1.31 and 1.33. The information is required by 37 CFR 1.31 and 1.33. The information is required by 35 U.S.C. 122 and 37. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USF CECCONNIC Will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their re;

forms are submitted.

forms if more than one signature is required, see below.

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Application Number

POWER OF	ATTORNEY	Filing Date					····
an	First Named	Inventor	Simo	Simon Edwards			
CORRESPONDE	Title		Aseptic Serial Filling of Containers				
INDICATION FORM		Art Unit					
INDICATION		Examiner N	ame		······································		
		Attorney Do	cket Num	ber 2002	-016		
				1. 2002	-010		
I hereby appoint:							
Practitioners associated v	with the Customer Number:			· · · · · · · · · · · · · · · · · · ·			
Practitioner(s) named be	low:						
	Name			Registration	Number		
Terry L. Miller		. 2	9,568				1
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as my/our attorney(s) or agent(s) Trademark Office connected the	s) to prosecute the application	identified above	, and to tra	insact all business	in the Un	ited States Pate	ent and
OR	ed with Customer Number:						
Firm or Individual Name	Law Office of Terry L. Miller						
Address	24832 Via San Ferna	ndo					
Address							
City	Mission Viejo		State	California	Zip	92692	
Country	US						· · · · · ·
Telephone	949-951-8456		Fax	949-951-84	56		
I am the: Applicant/Inventor. Assignee of record of Statement under 37 C	the entire interest. See 37 CFI FR 3.73(b) is enclosed. (Form	R 3.71. 1 PTO/SB/96)					•
	SIGNATURE of		ssignee o	f Record			
Name Cheşter Sav	age						
Signature (i)	To Kara	CIP_				···	
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NOTE: Signatures of all the Inventor forms if more than one signature is	rs or assignees of record of the en required, see below.	tire interest or thei	representa	tive(s) are required.	Submit mul	lipte	-7
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	Application Number	Take Only Control Hornog
POWER OF ATTORNEY	Filing Date	
and	First Named Inventor	Simon Edwards
CORRESPONDENCE ADDRESS	Title	Aseptic Serial Filling of Containers
INDICATION FORM	Art Unit	The second secon
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Terry L. Miller		29,568			
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Firm or	Law Office of Terry L. Mille	_		· · · · · · · · · · · · · · · · · · ·	
Individual Name Address		· · · · · · · · · · · · · · · · · · ·		·	
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Telephone	949-951-8456	Fax	949-951-84		
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Applicant/Inventor.	•	•			į
Assignee of record of	the entire interest. See 37 CFR 3.71.				
Statement under 37 C	FR 3.73(b) is enclosed. (Form PTO/S	B/96)			
	SIGNATURE of Applica	ant or Assignee o	f Record		
Name Donald E. R	ipley				
Signature Uinalel	8 Rus Ceny				
Date MARCI	11,2004		Telephone	760- 213-0436	
NOTE: Signatures of all the inventoring if more than one signature is	urs or assignees of record of the entire intere	st or their representa	tive(s) are required.	Submit multiple	
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